Effectiveness of Care Measure

Medication Reconciliation Post-Discharge (MRP)

Learn how to improve your Healthcare Effectiveness Data and Information Set (HEDIS®) rates. This tip sheet gives you key details about the MRP measure, coding information and more resources.

Measure

The percentage of Health Net* Cal MediConnect Plan (Medicare-Medicaid Plan) patients ages 18 and older who were discharged from January 1 to December 1 of the measurement year and had their medications reconciled within 30 days after discharge (a total of 31 days). MRP:

- Is a type of review where the discharge medications are reconciled with the most recent medication list in the outpatient medical record.
- Is conducted by a prescribing doctor, clinical pharmacist or registered nurse.
- Does not have to be completed in a face-to face visit.

Note: Only documentation in the outpatient chart meets the intent of the measure, but an outpatient visit is not required.

Exclusions

Patients enrolled in hospice or using hospice services during the measurement year.

Best practices

- Ensure systems are in place to promptly notify primary care physicians (PCPs) when their patients are admitted and discharged.
- Ensure facilities send the discharge summary to the PCP.
- Schedule follow-up visits with the PCP within 30 days of discharge.
- Obtain National Provider Identifier (NPI) numbers for nurse or pharmacist performing MRP in order to bill for service.

Email the Quality Improvement team for more details at **CQI_Medicare@healthnet.com.**

Coding

Completion of this measure can be captured with these CPT codes.

CPT II 1111F	Discharge medications reconciled with the current medication list in the outpatient medical record. Code can be billed alone since a face-to-face visit is not required.
CPT 99483	Care planning services to individuals with cognitive impairment, including Alzheimer's disease, and requires assessments and evaluations, includes medication reconciliation and review for high-risk medications, if applicable.
CPT 99495	Transitional care management services with moderate complexity (face-to-face visit within 14 days of discharge).
CPT 99496	Transitional care management services, with high complexity (face-to-face visit within 7 days of discharge).

(continued)

PROVIDER COMMUNICATIONS

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Medical record documentation

Documentation in the medical record must include evidence of medication reconciliation and the date it was performed. Any of the following meets the criteria:

	IN CHART	DOCUMENTATION DATED WITHIN 30 DAYS OF DISCHARGE AND SIGNED BY CORRECT PROVIDER TYPE
30-day post-discharge visit made	Current medication list in the progress notes	• Notation provider aware of admission, and • Evidence of medication reconciliation of discharge and current medications.
No visit	Current medication list	• Notation of no new medications ordered on discharge, or • Notation to discontinue discharge medications, or • No changes to discharged medications, or • Notation that current and discharge medications reconciled, or • Notation that discharged medications were reviewed.
No visit	Current medication list discharge summary	• Documentation in discharge summary that the discharge medications were reconciled with the most recent outpatient medications, and • Discharge summary filed in chart within 30 days.